# CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

# STATEMENT OF ECONOMIC INTERESTS COVER PAGE



Please type or print in ink.		
NAME OF FILER (LAST)	LOREN	(MIDDLE)
1. Office, Agency, or Court		
Agency Name  CHONES Function Ac  Division, Board, Department, District, if applicable	countability Oversi Your Position Committee	Alember
▶ If filing for multiple positions, list below or on an attachment.		2 1 <u>1</u> 2 1 4 4 5
Agency:	Position:	
2. Jurisdiction of Office (Check at least one box)		
State	☐ Judge (Statewide Jurisdiction)	
Multi-County	County of	
City of	Other	
3. Type of Statement (Check at least one box)		
Annual: The period covered is January 1, 2010, through December 2010.	cember 31, Leaving Office: Date Left (Check one)	
The period covered is, through Dec 2010.	cember 31, O The period covered is January leaving office.	uary 1, 2010, through the date of
Assuming Office: Date/	The period covered is of leaving office.	, through the date
Candidate: Election Year Office so	ught, if different than Part 1:	
4. Schedule Summary		<b>-</b>
Check applicable schedules or "None."	► Total number of pages including this	cover page:
Schedule A-1 - Investments - schedule attached	Schedule C - Income, Loans, & Bus	iness Positions - schedule attached
Schedule A-2 - Investments - schedule attached	Schedule D - Income - Gifts - sche	
Schedule B - Real Property – schedule attached	Schedule E - Income - Gifts - Trave	el Payments - schedule attached
-or- None - No report	able interests on any schedule	
5. Verification		
MAILING ADDRESS (Business or Agency Address Recommended - Public Document)  300  Capitol Mall Sur  DAYTIME TELEPHONE NUMBER	te 1850 Sacramento	CA 95814
herein and in any attached schedules is true and complete. I ack	nowledge this is a public document.	of C
I certify under penalty of perjury under the laws of the State of	of California that the	
Date Signed 8 30 (Month, day, year)	Signature	

## SCHEDULE A-1 Investments

#### Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA F			
Name Loven	6, L	_ip	Son

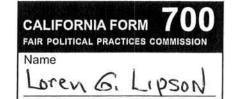
NAME OF BUSINESS ENTITY NAME OF BUSINESS ENTITY Stock-Host-Inter WARIA GENERAL DESCRIPTION OF BUSINESS ACTIVITY GENERAL DESCRIPTION OF BUSINESS ACTIVITY FAIR MARKET VALUE FAIR MARKET VALUE \$2,000 - \$10,000 \$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT Stock Other \_ Stock Other \_ Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: /\_\_\_\_\_/\_10\_ /\_\_/10 ACQUIRED DISPOSED ACQUIRED DISPOSED NAME OF BUSINESS ENTITY ▶ NAME OF BUSINESS ENTITY GMA C GE BOND ROND GENERAL DESCRIPTION OF BUSINESS ACTIVITY GENERAL DESCRIPTION OF BUSINESS ACTIVITY FAIR MARKET VALUE FAIR MARKET VALUE S10,001 - \$100,000 \$2,000 - \$10,000 \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 Over \$1,000,000 \$100,001 - \$1,000,000 NATURE OF INVESTMENT BONT NATURE OF INVESTMENT Other \_\_ Stock escribe) (Describe) Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: ACQUIRED ACQUIRED NAME OF BUSINESS ENTITY NAME OF BUSINESS ENTITY GENERAL DESCRIPTION OF BUSINESS ACTIVITY GENERAL DESCRIPTION OF BUSINESS ACTIVITY FAIR MARKET VALUE FAIR MARKET VALUE \$10,001 - \$100,000 \$2,000 - \$10,000 \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT NATURE OF INVESTMENT Stock Other \_ Stock Other \_\_ (Describe) (Describe) Partnership O Income Received of \$0 - \$499 Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C) O Income Received of \$500 or More (Report on Schedule C) IF APPLICABLE, LIST DATE: IF APPLICABLE, LIST DATE: /\_10 ACQUIRED ACQUIRED

Comments: \_

### SCHEDULE A-2

## Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)



▶ 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Health in Aging Institute	Turnagain Invest, Inc.
Address (Business Address Acceptable)	Po Box J So Posadena 9(13) Address (Business Address Adceptable)
Check one  Trust, go to 2  Business Entity, complete the box, then go to 2	Check one  Trust, go to 2  Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY  Consult via Medical and Legal  FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$1,000,000 ACQUIRED DISPOSED  Over \$1,000,000  NATURE OF INVESTMENT Sole Proprietorship Partnership	GENERAL DESCRIPTION OP BUSINESS ACTIVITY  FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  ACQUIRED DISPOSED  Over \$1,000,000  NATURE OF INVESTMENT  Sole Proprietorship Partnership Other
YOUR BUSINESS POSITION PRESIDENT OWNER	YOUR BUSINESS POSITION TRICAINT JOWNER
► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
AU	INA
Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property	Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:  \$2,000 - \$10,000	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2010/2011) Sch. A-2

### SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Loren 6, L	-IPSON

	► STREET ADDRESS OR PRECISE LOCATION
CHY	CITY
\$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 ACQUIRED DISPOSED	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust Easement	Ownership/Deed of Trust Easement
Leasehold Other	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
You are not required to report loans from commercial of business on terms available to members of the publiand loans received not in a lender's regular course of	ending institutions made in the lender's regular course lic without regard to your official status. Personal loans business must be disclosed as follows:
of business on terms available to members of the pub	lic without regard to your official status. Personal loans
of business on terms available to members of the pub- and loans received not in a lender's regular course of	lic without regard to your official status. Personal loans business must be disclosed as follows:
of business on terms available to members of the pub- and loans received not in a lender's regular course of	lic without regard to your official status. Personal loans business must be disclosed as follows:
of business on terms available to members of the publiand loans received not in a lender's regular course of  NAME OF LENDER*	lic without regard to your official status. Personal loans business must be disclosed as follows:  NAME OF LENDER*
of business on terms available to members of the public and loans received not in a lender's regular course of  NAME OF LENDER*  ADDRESS (Business Address Acceptable)	lic without regard to your official status. Personal loans business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)
of business on terms available to members of the public and loans received not in a lender's regular course of  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER	lic without regard to your official status. Personal loans business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER
of business on terms available to members of the public and loans received not in a lender's regular course of  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)	Ic without regard to your official status. Personal loans business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)
of business on terms available to members of the public and loans received not in a lender's regular course of  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  None  None	lic without regard to your official status. Personal loans business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  Whone  None
of business on terms available to members of the publication and loans received not in a lender's regular course of  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)  HIGHEST BALANCE DURING REPORTING PERIOD	Ic without regard to your official status. Personal loans business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)  Mone  HIGHEST BALANCE DURING REPORTING PERIOD
of business on terms available to members of the publication and loans received not in a lender's regular course of   NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE  TERM (Months/Years)  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000  \$1,001 - \$10,000	lic without regard to your official status. Personal loans business must be disclosed as follows:  NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  INTEREST RATE TERM (Months/Years)

#### SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name	G. LIPSON

► 1. INCOME RECEIVED	► 1. INCOME RECEIVED
ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE	NAME OF SOURCE OF INCOME  Health was the way That the ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
GROSS INCOME RECEIVED  \$500 - \$1,000	GROSS INCOME RECEIVED  \$500 - \$1,000
of a retail installment or credit card transaction, made	lending institutions, or any indebtedness created as part in the lender's regular course of business on terms your official status. Personal loans and loans received
NAME OF LENDER W	INTEREST RATE None TERM (Months/Years)
ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LOAN  None Personal residence
HIGHEST BALANCE DURING REPORTING PERIOD	Real PropertyStreet address
\$500 - \$1,000 \$1,001 - \$10,000	Guarantor
\$10,001 - \$100,000	
OVER \$100,000	Other(Describe)
Comments:	